| | | | FCC Form |
|----------|---|--|--|
| Mobility | | | Approved by OMB |
| | §54.1009 Annual Reporting | Avg. Burdon Ectimo | OMB 3060-1185 te per Respondent: 18 Hours |
| Data Col | lection Form | Avg. Burden Estilla | te per kespondent. 18 nours |
| <010> | Study Area Code | 378035 | |
| <015> | Study Area Name | Pinpoint Wireless, Inc. | |
| <020> | Program Year | 2018 | |
| <030> | Contact Name: Person USAC should contact with questions about this data | Lisa Ruf | |
| <035> | Contact Telephone Number: Number of the person identified in data line <030> | 3086973375 ext. | |
| <039> | Contact Email: Email of the person identified in data line <030> | lisa.ruf@pnpt.com | |
| | | | |
| | | | |
| | | | |
| <040> | Has the information required pursuant to §54.1009 | been provided with a Form 481 filing (Y/N) <040> | |
| | <041> Attach a description of the documents file | ed with the Form 481 reporting <041> | |
| | · | . 0 | |
| | <042> Cite the Study Area Code (SAC) for the Fo | rm 481 reporting <042> | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| <080> | <u>Tribal Lands Reporting (y/n?)</u> (Does this study area cov | er tribal lands? Yes or No) | |

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

| 50) Car | rier Contact Form | | | FCC Form 690 Approved by OMB OMB Control No. 3060-1189 Page 2 of 8 |
|---|--|---|-------------------------|---|
| <010> | Study Area Code | | 378035 | |
| <015> | Study Area Name | | Pinpoint Wireless, Inc. | |
| <020> | Program Year | | 2018 | |
| <030> | Contact Name - Person USAC should contact regarding t | | Lisa Ruf | |
| <035> | Contact Telephone Number - Number of person identifi | | 3086973375 ext. | |
| <039> | Contact Email Address - Email Address of person identif | ied in data line <030> | lisa.ruf@pnpt.com | |
| porting | Carrier / Mobility Fund Phase 1 Winning Bidder | | | |
| <110> | FCC Registration Number | 2377901 | | |
| <111> | Filing Carrier Name | Pinpoint Wireless, | Inc. | |
| <112> | Winning Bidder Carrier Name | Pinpoint Wireless, | Inc. | |
| <113> | Street Address (or PO Box) | 611 Patterson St. | | |
| <114> | City | Cambridge | | |
| <115> | State | | | |
| | | NE | | |
| <116> | Zip-Code | 69022 | | |
| <117> | Telephone Number | 3086973375 ext. | | |
| <118> | Fax Number | 3086973631 | | |
| <119> | Email Address | lisa.ruf@pnpt.com | | |
| <120> <121> <122> <122> <123> <124> <125> | if same as above, indicate in this box Name (First, MI, Last, Suffix) Filing Carrier Name Street Address (or PO Box) City State Zip-Code | Lisa Ruf Pinpoint Wireless, : 611 Patterson St Cambridge NE 69022 | Inc. | |
| <126> | Telephone Number | 3086973375 ext. | | |
| <127> | Fax Number | 3086973631 | | |
| <128> | Email Address | lisa.ruf@pnpt.com | | |
| uthorize | id Agent Information if no agent, indicate in this box | | | |
| <130> | Name (First, MI, Last, Suffix) | | | |
| <131> | Company | | | |
| <132> | Street Address (or PO Box) | | | |
| <133> | City | | | |
| <134> | State | | | |
| <135> | Zip-Code | | | |
| | - · | | | |
| | Telephone Number | | | |
| <136> | - | | | |
| <136> <137> <138> | Fax Number Email Address | | | |

| (060) Coverage and Performance Report | FCC Form 690 |
|---------------------------------------|---------------------------|
| | Ap proved by OMB |
| | OMB Control No. 3060-1185 |
| | Page 3 of 8 |

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | lisa.ruf@pnpt.com |
| | | |
| <140> | Coverage and Performance Report Year 01/2017 - 08/2017 | |

378035_CPRe_Broadband_and_Voice_NE.zip, 378035_CPRe_DriveTest_NE.zip, 378035_CPRe_PropagationStudy_NE.zip

Coverage and Performace attachments

Percentage of Total

Population Reached by

Service

| <141> | <a1></a1> | <a2></a2> | <a3></a3> | <b1></b1> | <b2></b2> | <b3></b3> | <c1></c1> | <c2></c2> | <c3></c3> | <d></d> |
|-------|-----------|-----------|-----------|--|---|--|---|---|---|---|
| | State | County | | Resident Population per Census Block | Resident Population Newly Reached by Service | Total Resident Population Reached by | Road Miles per Census Block | "Road Miles per Census Block Newly Reached | Total Road Miles covered per Census Block | Certify that Coverage and Performance data is uploaded (Yes/no) |
| | | | | 9 | See attach | ed workst | neet | | | |
| | | | | | oo allaon | oa workor | 1000 | | | |
| | | | | | | | | | | |
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| | <u> </u> | ļ | ļ | | | | <u> </u> | 1 | ļ | |

Percentage of Total

Road Miles covered by Service

| (070) Urban Rate Comparability Certification Compliance | FCC Form 690 |
|---|---------------------------|
| | Approved by OMB |
| | OMB Control No. 3060-1185 |
| | Page 4 of 8 |

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | lisa.ruf@pnpt.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4) certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate. Pinpoint Wireless, Inc. Name of Reporting Carrier: CERTIFIED ONLINE Date 06/29/2018 Signature of Authorized Officer: J Thomas Shoemaker Printed name of Authorized Officer: Executive Vice President Title or position of Authorized Officer: 3086973375 ext. Telephone number of Authorized Officer: 378035 Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

| Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier | | | | | |
|---|--|--|--|--|--|
| I certify that (Name of Agent) | is authorized to submit the information reported on behalf of the reporting | | | | |
| carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the | | | | | |
| authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. | | | | | |
| Name of Authorized Agent: | | | | | |
| Name of Reporting Carrier: | | | | | |
| Signature of Authorized Officer or Employee: | Date: | | | | |
| Printed name of Authorized Officer or Employee: | | | | | |
| Title or position of Authorized Officer or Employee: | | | | | |
| Telephone number of Authorized Officer or Employee: | | | | | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: | | | | |
| , , | nunished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | |

TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent Author | to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier |
|--|--|
| , as agent for the reporting carrier, certify that I am autho data provided by the reporting carrier; and, to the best of | d to submit the certification on behalf of the reporting carrier; I have provided the data reported herein base knowledge, the information reported herein is accurate. |
| Name of Reporting Carrier: | |
| Name of Authorized Agent Firm: | |
| Signature of Authorized Agent or Employee of Agent: | Date: |
| Name of Authorized Agent Employee: | |
| Title or position of Authorized Agent or Employee of Agent | |
| elephone number of Authorized Agent or Employee of Age | |
| | Filing Due Date for this form: |

| 080) Triba | al Lands Reporting | | | FCC Form 690 Approved by OMB OMB Control No. 3060-1185 |
|----------------|---|------------------|---------------------------------|--|
| | | | | Page 5 of 8 |
| -040· | Church Aven Code | | | |
| <010> <015> | Study Area Code Study Area Name | | 378035 Pinpoint Wireless, Inc. | |
| <020> | Program Year | | 2018 | |
| <030> | Contact Name - Person USAC should contact regarding | this data | Lisa Ruf | |
| <035> | Contact Telephone Number - Number of person identifi | | | |
| <039> | Contact Email Address - Email Address of person identif | ied in data line | <030> lisa.ruf@pnpt.com | |
| <142> | State | | | |
| 11.12 | State | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <143> | County | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <144> | Tribal Land(s) on which ETC Serves | | | |
| | | | | |
| | | | | |
| | | | | |
| <145> | Tribal Government Engagement Obligation | | | |
| | | Name of Attache | d Document (.pdf) | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | If your company serves Tribal lands, please select (Yes, l | | ble) for | |
| | each of these boxes to confirm the status described on PDF, on line 145, demonstrates coordination with the T | | | |
| | government pursuant to § 54.1004 includes: | TIDai | | |
| | Botoent parsaunt to 3 o 11200 1 morates. | | | |
| | | | | |
| | | | Select | |
| | | | (Yes, No, Not Applicable) | |
| <146> | Needs assessment and deployment planning with a foo | cus on Tribal | | |
| | community anchor institutions; | | | |
| <147> | Feasibility and sustainability planning; | | | |
| <148> | Marketing services in a culturally sensitive manner; | | | |
| <149> | Compliance with Rights of way processes | | | |
| <150> | Compliance with Land Use permitting requirements | | | |
| <151> | Compliance with Facilities Siting rules | | | |
| | | | | |
| <152> | Compliance with Environmental Review processes | | | |
| <153> | Compliance with Cultural Preservation review processes | | | |
| <154> | Compliance with Tribal Business and Licensing requirem | nents. | | |

| (090) Project | Update Information | | FCC Form 690 |
|---------------|---|---------------|---------------------------|
| | | | Approved by OMB |
| | | | OMB Control No. 3060-1185 |
| | | | Page 6 of 8 |
| | | | |
| <010> | Study Area Code | 378035 | |
| <015> | Study Area Name | Pinpoint Wi | reless, Inc. |
| <020> | Program Year | 2018 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | lisa.ruf@pn | pt.com |
| | | | |
| <200> | Date Authorized to Receive Support | 06/07/2 | 013 |
| <201> | Targeted Completion Date | 09/30/2 | 014 |
| <202> | Total Mobility Fund Support Awarded | 314759. | 52 |
| <203> | Total Mobility Fund Support Disbursed | 307457. | 10 |
| | | | |
| | | | |
| <210> | Actual Completion Date | 12/20/ | 2014 |
| | | 211 27 | 3035.pdf |
| <211> | Project Status Description (attached) | 211_378 | 3035.pdf |
| | | | |
| | | {Name | of PDF attached} |
| | Please check these boxes below to confirm that the attached PDF, on line | • | , |
| | 211, contains a project status pursuant to §54.1005(b)(2)(v). The information | | |
| | shall be submitted as appropriate. | | |
| <212> | Status of Network Deployment - Network Design | V | 7 |
| <213> | Status of Network Deployment - Construction | | 1 |
| <214> | Status of Network Deployment - Deployment | | 4 |
| <215> | Status of Network Deployment - Maintenance | | - |
| <216> | Project Budget Status | ~ | 1 |
| <217> | Project Plan Status | | † |
| 721/ | Toject Tall States | | 1 |
| <218> | Network will Support 3G/4G Mobile Service ? |) 3G <i>(</i> | O 4G |
| | | , (| J 3 |

| (101) Cer | tification - Reporting Carrier | | FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 7 of 8 |
|-----------|---|-------------------------|---|
| <010> | Study Area Code | 378035 | |
| <015> | Study Area Name | Pinpoint Wireless, Inc. | |
| <020> | Program Year | 2018 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. | |

lisa.ruf@pnpt.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

Contact Email Address - Email Address of person identified in data line <030>

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients

l certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Pinpoint Wireless, Inc.

Signature of Authorized Officer:

CERTIFIED ONLINE

Date 06/29/2018

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Executive Vice President

Telephone number of Authorized Officer:

3086973375 ext.

Study Area Code of Reporting Carrier:

378035

Filing Due Date for this form:

07/02/2018

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. 88 502, 503(b), or fine or imprisonment

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

06/18/2018 Page 7

| (102) Certification - Agent / Carrier | FCC Form 690 |
|---------------------------------------|---------------------------|
| | Approved by OMB |
| | OMB Control No. 3060-1185 |
| | Page 8 of 8 |

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | lisa.ruf@pnpt.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

| I certify that (Name of Agent) | o File for Mobility Fund Recipients on Behalf of Reporting Carrier is authorized to submit the information reported on behalf of the reporting carrier. I ities include ensuring the accuracy of the data reporting requirements provided to the authorized |
|---|--|
| agent; and, to the best of my knowledge, the reports and data provide | , , , |
| Name of Authorized Agent: | |
| Name of Reporting Carrier: | |
| Signature of Authorized Officer: | Date: |
| Printed name of Authorized Officer: | |
| Title or position of Authorized Officer: | |
| Telephone number of Authorized Officer: | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: |
| , , | by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment e 18 of the United States Code, 18 U.S.C. § 1001. |

TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier | | |
|---|--|-----------|
| l, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate. | | |
| Name of Reporting Carrier: | | |
| Name of Authorized Agent Firm: | | |
| Signature of Authorized Agent or Employee of Agent: Date: | | |
| Name of Authorized Agent Employee: | | |
| Title or position of Authorized Agent or Employee of Agent | | |
| Telephone number of Authorized Agent or Employee of Agent: | | |
| Study Area Code of Reporting Carrier: Filing Due Date for this form: | | |
| Persons willfully making false statements on this form can l | punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under 18 of the United States Code, 18 U.S.C. § 1001. | ler Title |

Attachments

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | lisa.ruf@pnpt.com |
| <140> | Coverage and Performance Report Year | 01/2017 - 08/2017 |

<a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne Resident Population Population **Road Miles** per Census covered per data is uploaded Newly Reached Block Newly Population per Reached by per Census **Census Block** (yes/no) by Service Reached Census Block Block Census Block Service State County Red Willow 311459631001016 0 0.42 Yes NE 0 0.44 0.42 Red Willow 311459631001020 0.06 0 ٥ NE 0.06 0.06 Yes 311459631001032 0.25 0 0 Yes NE 0.25 0.25 Red Willow 311459631001048 0.12 NE 0.12 Yes 0.12 311459631001513 0.02 NE 0 0 0.02 0.02 Yes 311459631001514 0.31 0 0 NE 0.31 0.31 Yes 311459631001515 NE 0 0 1.36 1.36 1.36 Yes 311459631001516 NE 0 0.12 0.12 Yes 0.12 Red Willow 311459631001517 0.22 NE 0 0 0.22 0.22 Yes 311459631003150 NE 0 0 5.22 5.22 5.22 Yes Red Willow 311459631003164 Yes 0 2.87 2.87 NE 0 2.87 Red Willow 311459631003168 3.48 Yes 0 ٥ 3.48 NE 3.48 Red Willow 311459631003169 0.37 Yes NE 0.37 0.37 Red Willow 311459631003170 Yes 0.44 0.44 NE 0.44 311459631003171 NE 0 0 0.08 0.08 0.08 Yes Red Willow 311459631003172 0 0.95 0.95 Yes NE 0 0.95 311459631003173 NE 0.36 0.36 Yes 0.36 Red Willow 311459631003174 0 0.58 NE 0 0.58 0.58 Yes 311459631003175 0 0 0.29 Yes NE 0.29 0.29 Red Willow 311459631003176 0 0.64 Yes 0 NE 0.64 0.64

> Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

Coverage and Performance Report Year

Contact Email Address - Email Address of person identified in data line <030>

<039>

<140>

<141>

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |

lisa.ruf@pnpt.com

01/2017 - 08/2017

<a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne Resident Population Population **Road Miles** per Census covered per data is uploaded Newly Reached Block Newly Population per Reached by per Census Census Block (yes/no) by Service Reached Census Block Census Block Service Block State County Red Willow 311459631003178 1.19 Yes NE 0 0 1.19 1.19 Red Willow 311459631003179 0.03 0 ٥ NE 0.03 0.03 Yes 311459631003182 0.09 0 0 Yes NE 0.09 0.09 Red Willow 311459631003233 6.09 NE 6.36 Yes 6.09 311459631003245 2.95 NE 0 0 2.95 3.04 Yes 311459631003247 2.22 0 0 NE 2.22 2.22 Yes 311459631003248 NE 0 0 0.56 0.56 0.56 Yes 311459631003249 NE 0 0.61 0.61 Yes 0.61 Red Willow 311459631003250 0.15 NE 0 0 0.15 0.15 Yes 311459631003251 NE 0 0 0.25 0.25 0.25 Yes Red Willow 311459631003252 Yes 0 2.35 2.35 NE 0 2.35 Red Willow 311459631003253 Yes 0 ٥ 0.13 NE 0.13 Red Willow 311459631003256 Yes NE 0.39 0.39 0.39 Red Willow 311459631003257 Yes 0.42 0.42 NE 0.42 311459631003258 NE 0 0 0.56 0.56 0.56 Yes Red Willow 311459631003259 0 0.34 0.34 Yes NE 0 0.34 311459631003260 NE 0.33 0.33 Yes 0.33 Red Willow 311459631003261 0 0.94 NE 0 0.94 0.94 Yes 311459631003263 0 Yes NE 0 0.09 0.09 0.09 Red Willow 311459631003264 0 0.76 Yes 0 0.76 NE 0.76

> Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

<039>

<141>

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |

lisa.ruf@pnpt.com

<140> Coverage and Performance Report Year 01/2017 - 08/2017

Contact Email Address - Email Address of person identified in data line <030>

<a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne Resident Population Population **Road Miles** per Census covered per data is uploaded Newly Reached Block Newly Population per Reached by per Census Census Block (yes/no) by Service Reached Census Block Census Block Service Block State County Red Willow 311459631003265 1.19 Yes NE 0 0 1.19 1.19 Red Willow 311459631003284 0 ٥ 1.79 NE 1.79 1.79 Yes Red Willow 311459631003285 0.98 0 0 Yes NE 0.98 0.98 Red Willow 311459631003286 0.65 NE 0.65 Yes 0.65 311459631003287 0.99 NE 0 0 0.99 0.99 Yes 311459631003288 3.09 0 0 NE 3.21 3.09 Yes 311459631003289 NE 0 0 0.07 0.07 0.07 Yes 311459631003291 NE 0 2.05 1.99 Yes 1.99 Red Willow 311459631003292 2.06 NE 0 0 2.01 2.01 Yes 311459631003293 NE 0 0 1.36 1.36 1.36 Yes Red Willow 311459631003294 Yes 0 0.27 NE 0 0.27 0.27 Red Willow 311459631003295 0.1 Yes 0 ٥ 0.1 NE 0.1 Red Willow 311459631003296 1.03 NE 1.03 Yes 1.03 Red Willow 311459631003297 Yes 0.07 0.07 NE 0.07 311459631003298 NE 0 0 0.1 0.1 0.1 Yes Red Willow 311459631003299 0 0.07 0.07 Yes NE 0 0.07 311459631003300 NE 0.28 0.28 Yes 0.28 Red Willow 311459631003301 0 1.51 NE 0 1.51 1.51 Yes 311459631003302 0 Yes NE 0 0.32 0.32 0.32 Red Willow 311459631003303 0 0.25 Yes 0 NE 0.25 0.25

> Percentage of **Total Population** Reached by Service

Percentage of Total Road Miles covered by Service

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | lisa.ruf@pnpt.com |
| <140> | Coverage and Performance Report Year | 01/2017 - 08/2017 |

<a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne Resident Population Population **Road Miles** per Census covered per data is uploaded Newly Reached Block Newly Population per Reached by per Census **Census Block** (yes/no) by Service Reached Census Block Block Census Block Service State County Red Willow 311459631003304 0.72 Yes NE 0 0 0.72 0.72 Red Willow 311459631003305 0.11 0 ٥ NE 0.11 0.11 Yes 311459631003306 0.52 0 0 Yes NE 0.52 0.52 Red Willow 311459631003313 0.04 NE 0.04 Yes 0.04 311459631003316 0.31 NE 0 0 0.31 0.31 Yes 311459631003317 0.08 0 0 NE 0.08 0.08 Yes 311459631003341 NE 0 0 0.46 0.46 0.46 Yes 311459631003342 NE 0 0.44 0.44 Yes 0.44 Red Willow 311459631003344 0.94 NE 0 0 0.94 0.94 Yes 311459631003352 NE 0 0 0.1 0.1 0.1 Yes Red Willow 311459631003353 Yes 0 0.09 0.09 NE 0 0.09 Red Willow 311459631003355 Yes 0 ٥ 0.45 NE 0.45 Red Willow 311459631003356 0.04 Yes NE 0.04 0.04 Red Willow 311459631003357 Yes 0.1 0.1 NE 0.1 311459631003358 NE 0 0 0.06 0.06 0.06 Yes Red Willow 311459631003359 0 0.27 0.27 Yes NE 0 0.27 311459631003360 NE 0.15 0.15 Yes 0.15 Red Willow 311459631003361 0 0.11 NE 0 0.11 0.11 Yes 311459631003363 0 Yes NE 0 0.62 0.62 0.62 Red Willow 311459631003364 0 1.17 Yes 0 NE 1.17 1.17

> Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

| <010> | Study Area Code | 378035 |
|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
| <030> | Contact Name - Person USAC should contact regarding this data | Lisa Ruf |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 3086973375 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | lisa.ruf@pnpt.com |
| <140> | Coverage and Performance Report Year | 01/2017 - 08/2017 |

<a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne Resident Population Population **Road Miles** per Census covered per data is uploaded Newly Reached Block Newly Population per Reached by per Census **Census Block** (yes/no) by Service Reached Census Block Block Census Block Service State County Red Willow 311459631003365 0 0.68 Yes NE 0 0.68 0.68 Red Willow 311459631003366 0.05 0 ٥ NE 0.05 0.05 Yes 311459631003367 0.12 0 0 Yes NE 0.12 0.12 Red Willow 311459631003368 0.04 NE 0.04 Yes 0.04 311459631003369 0.28 NE 0 0 0.28 0.28 Yes 311459631003370 0.16 0 0 NE 0.16 0.16 Yes 311459631003371 NE 0 0 0.2 0.2 0.2 Yes 311459631003373 NE 0 0.12 0.12 Yes 0.12 Red Willow 311459631003374 0.32 NE 0 0 0.32 0.32 Yes 311459631003376 NE 0 0 0.23 0.23 0.23 Yes Red Willow 311459631003378 0.08 Yes 0 0.08 NE 0 0.08 Red Willow 311459631003379 Yes 0 ٥ 0.28 NE 0.28 Red Willow 311459631003381 0.14 Yes NE 0.14 0.14 Red Willow 311459631003394 Yes 0.08 0.08 NE 0.08 311459631003395 NE 0 0 0.13 0.13 0.13 Yes Red Willow 311459631003397 0 0.08 0.08 Yes NE 0 0.08 311459631003399 NE 0.16 0.16 Yes 0.16 Red Willow 311459631003400 0 0.0 NE 0 0.0 0.0 Yes 311459631003409 0 0 0.13 0.13 Yes NE 0.13 Red Willow 311459631003410 0 0.14 Yes 0 NE 0.14 0.14

> Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

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|-------|---|-------------------------|
| <015> | Study Area Name | Pinpoint Wireless, Inc. |
| <020> | Program Year | 2018 |
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<a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne Resident Population Population **Road Miles** per Census covered per data is uploaded Newly Reached Block Newly Population per Reached by per Census **Census Block** (yes/no) by Service Reached Census Block Block Census Block Service State County Red Willow 311459631003411 0 0.15 Yes NE 0 0.15 0.15 Red Willow 311459631003412 0.14 0 ٥ NE 0.14 0.14 Yes 311459631003413 0.14 0 0 Yes NE 0.14 0.14 Red Willow 311459631003414 0.14 NE 0.14 Yes 0.14 311459631003415 0.14 NE 0 0 0.14 0.14 Yes 311459631003416 0.14 0 0 NE 0.14 0.14 Yes 311459631003417 NE 0 0 0.14 0.14 0.14 Yes 311459631003423 NE 0 0.05 0.05 Yes 0.05 Red Willow 311459631003426 0.36 NE 0 0 0.36 0.36 Yes 311459631003428 NE 0 0 0.87 0.87 0.87 Yes Red Willow 311459631003429 Yes 0 1.02 1.02 NE 0 1.02 Red Willow 311459631003430 Yes 0 ٥ 0.73 NE 0.73 Red Willow 311459631003437 0.16 Yes NE 0.16 0.16 Red Willow 311459631003439 Yes 0.42 0.42 NE 0.42 311459631003440 NE 0 0 0.1 0.1 0.1 Yes Red Willow 311459631003441 0 0.29 0.29 Yes NE 0 0.29 311459631003443 NE 0.45 0.45 Yes 0.45 Red Willow 311459631003444 0 0.13 NE 0 0.13 0.13 Yes 311459631003445 0 0 0.22 Yes NE 0.22 0.22 Red Willow 311459631003446 0 0.14 Yes 0 NE 0.14 0.14

> Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

| (060) | Coverage and | Performance | Report |
|-------|--------------|-------------|--------|
| | | | |

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| <140> | Coverage and Performance Report Year | 01/2017 - 08/2017 |

<141> <a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne per Census Resident Population Population **Road Miles** covered per data is uploaded Population per Newly Reached Reached by per Census Block Newly Census Block (yes/no) Census Block by Service Service Block Reached County Red Willow Census Block State 311459631003447 NE 0 0 0.14 Yes 0.14 0.14 Red Willow 311459631003455 0.08 0 NE 0 0.08 Yes 0.08

> Percentage of Total Population Reached by Service

| 0 | | | |
|---|--|--|--|
| | | | |
| | | | |
| | | | |

Percentage of Total Road Miles covered by Service

| 99 | | | |
|----|--|--|--|
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